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maintenance lee nouncau	ons.								
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							_/	(Date)	
APPLICATION NO. FILING DATE		FIRST NAMED INVE		TOR	ATTC		NEY DOCKET NO.	CONFIRMATION NO.	
09/938,870 08/23/2001		Tony F. Rodriguez			P0392		1150		
TITLE OF INVENTION: DIGITAL WATERMARKS FOR CHECKING AUTHENTICITY OF PRINTED OBJECTS									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0		\$1700	06/05/2007	
EXAMINER		ART UNIT	CLASS-SUBCLASS	;					
BROWN, CHRISTOPHER J		2134	713-176000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence) 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Beculerton, Oregon Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government									
4a. The following fee(s) an 4a. The following fee(s) an Publication Fee (No Advance Order - #	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50 - 10.71 (enclose an extra copy of this form).								
5. Change in Entity State a. Applicant claims	SMALL ENTITY statu	s. See 37 CFR 1.27.			, -		ITY status. See 37 CF		
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Authorized Signature			Date	6-5	-07				
Typed or printed name	Joel R.	Meyer			Registration N	No	37,677		
an application. Confidentisubmitting the completed this form and/or suggestion Box 1450, Alexandria, Virginia 2231	ality is governed by 35 application form to the ns for reducing this burginia 22313-1450. DC 3-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the	1.14. This collection is depending upon the certain Complete Form	is esti indivi Officer IS TO	mated to take 12 dual case. Any cor, U.S. Patent and THIS ADDRES:	minutes omments Tradema S. SEND	to complete, including on the amount of ting ark Office, U.S. Department of the To: Commissioner in the complete in the comple	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450, number.	